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|---|-------------------------------|-------------------|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) | Attorney Docket Number | 1/1282 |
| | First Named Inventor | Anderson, Craig |
| | COMPLETE IF KNOWN | |
| | Application Number | 10 / 079,703 |
| | Filing Date | February 20, 2002 |
| | Group Art Unit | To be assigned |
| | Examiner Name | To be assigned |

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Pharmaceutical combination of angiotensin II antagonists and angiotensin I converting enzyme inhibitors

the specification of which (Title of the Invention)

☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) 02/20/2002 as United States Application Number or PCT International Application Number 10/079703 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

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| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| Alan R. Stempel | 28,991 | Philip I. Datlow | 41,482 |
| Mary-Ellen M. Devlin | 27,928 | Timothy X. Witkowski | 40,232 |
| Anthony P. Bottino | 41,629 | David A. Dow | 46,124 |

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Direct all correspondence to: ☒ Customer Number OR ☐ Correspondence address below

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|---------|--|-----------|--|-----|--|
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| Address | | | | | |
| Address | | | | | |
| City | | State | | ZIP | |
| Country | | Telephone | | Fax | |

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| Name of Sole or First Inventor: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle (if any)) | | Family Name or Surname | |
| Craig | | ANDERSON | |
| Inventor's Signature | | | Date |
| | | | 1 JULY 2002 |
| Residence: City | Devonport/Auckland | State | Country |
| | | | New Zealand |
| Post Office Address | 17 Cambria Road | | |
| Post Office Address | | | |
| City | Devonport/Auckland | State | Country |
| | | | New Zealand |

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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| DECLARATION | ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u> |
|--------------------|---|

| | | | | | | | |
|---|-----------------------|---|---------|------------------------|----------|-------------|---------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Salim | | | | YUSUF | | | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Carlisle | State | Ontario | Country | Canada | Citizenship | CA |
| Post Office Address | 48 Woodend Drive | | | | | | |
| Post Office Address | | | | | | | |
| City | Carlisle | State | Ontario | ZIP | LOR 1H2 | Country | Canada |
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| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Peter | | | | SLEIGHT | | | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Wheatley, Oxfordshire | State | | Country | England | Citizenship | GB |
| Post Office Address | 32 Crown Road | | | | | | |
| Post Office Address | | | | | | | |
| City | Wheatley/Oxfordshire | State | | ZIP | OX33 1UL | Country | England |
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| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Lutz | | | | HILBRICH | | | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | Wiesbaden | State | | Country | Germany | Citizenship | DE |
| Post Office Address | Hasengartenstrasse 20 | | | | | | |
| Post Office Address | | | | | | | |
| City | Wiesbaden | State | | ZIP | 65189 | Country | Germany |

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Case No. 1/1282



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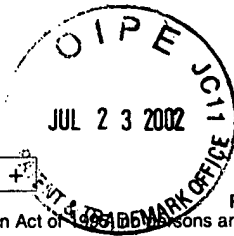
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| | | | |
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| Name | | | |
| Address | | | |
| Address | | | |
| City | State | ZIP | |
| Country | Telephone | Fax | |

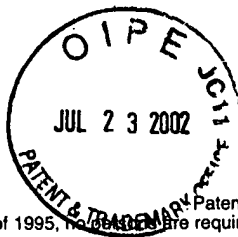
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Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

| | | | |
|--|--------------------|------------------------|------------------------------------|
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Craig | | ANDERSON | |
| Inventor's Signature | Date | | |
| Residence: City | Devonport/Auckland | State | Country New Zealand Citizenship AU |
| Post Office Address | 17 Cambria Road | | |
| Post Office Address | | | |
| City | Devonport/Auckland | State | ZIP Country New Zealand |

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

| | | | |
|---|-----------------------|---|----------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) | | Family Name or Surname | |
| Salim | | YUSUF | |
| Inventor's Signature | | | Date 30/June/2002 |
| Residence: City | Carlisle | State Ontario | Country Canada |
| | | | Citizenship CA |
| Post Office Address | 48 Woodend Drive | | |
| Post Office Address | | | |
| City | Carlisle | State Ontario | ZIP LOR 1H2 |
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| | | | Citizenship DE |
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| Post Office Address | | | |
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| Salim | | | | YUSUF | | | |
| Inventor's Signature | | | | | | Date | |
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| Peter | | | | SLEIGHT | | | |
| Inventor's Signature | <i>Peter Sleight</i> | | | | | Date | 06/24/02 |
| Residence: City | Wheatley, Oxfordshire | State | | Country | England | Citizenship | GB |
| Post Office Address | 32 Crown Road | | | | | | |
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| Residence: City | Wiesbaden | State | | Country | Germany | Citizenship | DE |
| Post Office Address | Hasengartenstrasse 20 | | | | | | |
| Post Office Address | | | | | | | |
| City | Wiesbaden | State | | ZIP | 65189 | Country | Germany |

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 1/1282

First Named Inventor Anderson, Craig

COMPLETE IF KNOWN

Application Number 10 / 079,703

Filing Date February 20, 2002

Group Art Unit To be assigned

Examiner Name To be assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Pharmaceutical combination of angiotensin II antagonists and angiotensin I converting enzyme inhibitors

the specification of which (Title of the Invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 02/20/2002 as United States Application Number or PCT International

Application Number 10/079703 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | Not Claimed | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
| | | |

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application or PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--|---------------------------------|--------------------------------------|
| | | |

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
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| Name | Registration Number | Name | Registration Number |
|----------------------|---------------------|----------------------|---------------------|
| Robert P. Raymond | 25,089 | Susan K. Pocchiari | 45,016 |
| Alan R. Stempel | 28,991 | Philip I. Datlow | 41,482 |
| Mary-Ellen M. Devlin | 27,928 | Timothy X. Witkowski | 40,232 |
| Anthony P. Bottino | 41,629 | David A. Dow | 46,124 |

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 28501 OR ☐ Correspondence address below

| | | | | | |
|---------|--|-----------|--|-----|--|
| Name | | | | | |
| Address | | | | | |
| Address | | | | | |
| City | | State | | ZIP | |
| Country | | Telephone | | Fax | |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | | | |
|--|--------------------|---|--|---------|-------------|
| Name of Sole or First Inventor: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle [if any]) | | Family Name or Surname | | | |
| Craig | | ANDERSON | | | |
| Inventor's Signature | | | | Date | |
| Residence: City | Devonport/Auckland | State | | Country | New Zealand |
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| Country | New Zealand | | | | |

☐ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

| | | | | | | | |
|---|-----------------------|---|---------|------------------------|----------|-------------|---------------------|
| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Salim | | | | YUSUF | | | |
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| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Peter | | | | SLEIGHT | | | |
| Inventor's Signature | | | | | | Date | |
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| Name of Additional Joint Inventor, if any: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | | | |
| Given Name (first and middle [if any]) | | | | Family Name or Surname | | | |
| Lutz | | | | HILBRICH | | | |
| Inventor's Signature | <i>Lutz Hilbrich</i> | | | | | Date | <i>July 24 2002</i> |
| Residence: City | Wiesbaden | State | | Country | Germany | Citizenship | DE |
| Post Office Address | Hasengartenstrasse 20 | | | | | | |
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